FOR INSTRUCTIONS, SEE BACK OF FORM

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FORM

DISCLOSURE SUMMARY PAGE DR-2 DISCLOSURE (Rev. 07/2004) REPORT COMMITTEE NAME (Must be same as on Statement of Organization) #6248 For Office Use Only American Federation of State, County, Municipal Employees Local 1868 Polk County Comm. # Logged In IMPORTANT: Indicate by # type of committee you are reporting for: 2 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party Scanned (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Computer Subdivision PAC (11) Local Ballot Issue Audited **CANDIDATE COMMITTEES ONLY:** Political Party (if applicable) Candidate Name Late reports are subject to possible civil and criminal Office Sought District (if Senate or House) penalties. SIGNATURE OF PERSON FILING REPORT I AM FILING A July 14, 2004 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # Local Committees, enter Date of Election ☐CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_ County & Local Committees, enter County in ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. which Election is held (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) .....\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) **SUB-TOTAL .....\$** 1495.93 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must \*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ \*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ......\$ \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ **CANDIDATE COMMITTEES ONLY:** CONSULTANT BREAKDOWN (Schedule G Attached?) VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form

SCHEDULE				
Α	MONETARY			
(Rev. 07/03)	RECEIPTS			
[7]				

#6248

COMMITTEE NAME (Must be same as on Statement of Organization)

American Federation of State, County, Municipal Employees Local 1868 Polk Co

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I N THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONT	RIBUTOR RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5.19.04 6.2.04 6.16.04 6.30.04	ID# CK#	Gary Ahn 409 W Broadway Colfax, IA 50054		\$12.00	
	ID#	Barb Post-Althaus 1510 Thompson Des Moines, IA 50312		2.∞	
	ID# CK#	James Appleby 1321 E 27th Ct Des Moines, IA 50317		16.00	
	ID#	Gary Ash 2335 E 34th St Des Moines, IA 50317		10.00	
	ID#	Angela Barnes 2719 42nd St Des Moines, IA 50310		4.00	
	ID# CK#	Fred Beattie 507 Brown St Runells, IA 50237		4,00	
	ID# CK#	William Bernard 1531 Searle Des Moines, IA 50317		4,00	
	ID# CK#	Robert Conley 300 Walnut #79-1203 Des Moines, IA 50309		12.00	
	ID# CK#	Pamela Conner 2715 E 40th Des Moines, IA 50317		12.00	
1	ID# CK#	Angela Connolly 4707 Beaver Des Moines, IA 50310		4.00	
<u> </u>		TO	SUB-TOTAL  [AL (if last page of this schedule)	\$ 80.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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# **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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Reset Form

#6248

COMMITTEE NAME (Must be same as on Statement of Organization)

American Federation of State, County, Municipal Employees Local 1868 Polk Co

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I N THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5.19.04 6.2.04 6.16.04 6.30.04	ID# CK#	Connie Ewing 25452 - 275th St Leon, IA 50144		\$4,00	
	ID# CK#	David Hawkins 615 SE Titus Des Moines, IA 50315		20.00	
	ID# CK#	David Hibbard 1042 Badger Creek Rd Van Meter, IA 50261		24.00	
	ID# CK#	Marci Hines 2112 E 24th St Des Moines, IA 50317		16.00	
	ID# CK#	Paul Houston 5644 Northview Pl West Des Moines, IA 50266		2.00	
	ID# CK#	Joel Johnson 10398 NW 44th Polk City, IA 50226		20,∞	
	ID# CK#	Mark Jones 207 Hart Ave Des Moines, IA 50315		10.00	
	ID#	Vaughn Lewis 4501 Marcourt Ln West Des Moines, IA 50266		8.36	
	ID# CK#	Marlin Luing Box 316 Bondurant, IA 50035		20.00	
<b>√</b>	ID# CK#	Larry Noble 3311 E Aurora Des Moines, IA 50317		10.00	
			SUB-TOTAL	\$ 134,36	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 3 (for Schedule A)

TOTAL (if last page of this schedule)

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

#6248

Reset Form

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) American Federation of State, County, Municipal Employees Local 1868 Polk Co

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I N THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5.19.84	ID# CK#	Charles Ripley PO Box 27122 West Des Moines, IA 50265		\$	
	ID# CK#	Myndi Scharf 2122 E 24th St Des Moines, IA 50317			
	ID# CK#	Larry Thompsen 404 Grant St, N Bondurant, IA 50035			
	ID# CK#	John Tyler 3423 SW 8th Street Des Moines, IA 50315			
	ID# CK#	Charles Verheul 107 4th St, NW Mitchellville, IA 50169			
$\checkmark$	ID# CK#	James Ward 4045 46th Des Moines, IA 50310			
	ID# CK#				
			SUB-TOTAL	\$ 34.50	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

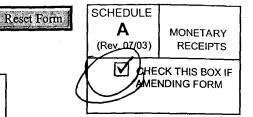
#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

#6248

COMMITTEE NAME (Must be same as on Statement of Organization)

American Federation of State, County, Municipal Employees Local 1868 Polk Co



STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER I IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5.19.04 6.2.04 6.16.04 6.30.04	ID# CK#	Charles Ripley PO Box 27122 West Des Moines, IA 50265		\$4,00	
	ID# CK#	Myndi Scharf 2122 E 24th St Des Moines, IA 50317		4,00	
	ID# CK#	Larry Thompsen 404 Grant St, N Bondurant, IA 50035		4.00	
	ID# CK#	John Tyler 3423 SW 8th Street Des Moines, IA 50315		2.50	
	ID# CK#	Charles Verheul 107 4th St, NW Mitchellville, IA 50169		16.00	
$\checkmark$	ID# CK#	James Ward 4045 46th Des Moines, IA 50310	,	4,00	
	ID#				
	ID# CK#				
	ID#				
	ID#				
	<b>I</b>	TOTAL (if last page	SUB-TOTAL  of this schedule)	\$ 34.50 \$ 248.86	

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### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES
. —	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)	# 6248
American Federation of State, County, Municipal Employees Local 1868	Polk County

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/14/04	ID# CK#	US Bank 520 Walnut Des Moines, IA 50309	May Fee	\$ 2.00
5/15/04	ID# CK#1107	Polk County Democrats 5661 Fleur Drive Des Moines, IA 50321	Contribution	200.00
6/14/04	ID#	US Bank 520 Walnut Des Moines, IA 50309	June Fee	2.00
6/16/04	ID# CK# <sub>1108</sub>	Hockensmith for Supervisor 3502 E 43rd Court Des Moines, IA 50317	Contribution	250.00
7/8/04	ID# CK# <sub>1109</sub>	AFSCME PEOPLE 1625 L Street, NW Washington, DC 20036	Specific Intent Donation	103.68
	ID# CK#			
	ID# CK#			
	ID# CK#			
		· · · · · · · · · · · · · · · · · · ·	SUB-TOTAL	\$

TOTAL (if last page of this schedule) \$ 557.68

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign pr operty costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund -raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.40 2(3)(i).)

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